Section 5.1: Application Information

Sponsors are required to submit an application each year to participate in the CACFP. Based on the information submitted in the application, ADE/H&N creates a computer database for each adult care center. The monthly claims for reimbursement submitted by the adult care center are compared to the information in the database.

The sponsor shall notify ADE of changes regarding any information which could affect the claims for reimbursement or its participation in the CACFP (Refer to Section 3.4.). A delay in reimbursement may result for sponsors who fail to notify ADE of any changes.

Sponsors are required to maintain records for a period of five years to support monthly claims for reimbursement and compliance with Program requirements. If administrative review or audit findings have not been resolved, the records shall be retained beyond the end of the five-year period or as long as it may require until such issues are resolved.

All accounts and records pertaining to the CACFP shall be made available upon request to representatives of the ADE-CACFP, the USDA, or the U.S. General Accounting Office for audit or review, at a reasonable time and place. If records are unavailable to support claims for meals paid for reimbursement, all meals will be disallowed which will result in an overpayment for which the sponsor will be responsible. The sponsor will then be listed as seriously deficient.

Section 5.2: Attendance

Sign-In/Sign-Out Records

Attendance records must be maintained as part of the monthly CACFP recordkeeping. Standard sign-in/sign out records or an automated sign-in/sign-out system is acceptable. Prior to using automated sign in/sing out records, an ADE approved computer generated meal count agreement must be on file. Automated sign-in/sign-out records must be signed at least weekly by the parent/guardian if the sponsor is not utilizing a back-up attendance record.

Enrollment Records (Emergency/Enrollment Forms 'Blue Cards')

All participants in care and claimed for reimbursement must be enrolled. Drop-ins must also have enrollment records on file. The number of participants enrolled is the total number of participants who attended the center during the claim month, regardless of whether or not they ate a meal. Enrollment Records must be updated at least annually.

Income Affidavits

An income affidavit must be on file for each participant listed on the Free or Reduced Claiming Percentage Rosters. Income Affidavits completed, signed and dated on or after July 1 are valid for a period of one year, ending June 30. Affidavits may be distributed no sooner than 30 days prior to July 1st (June 1st). If the adult participant is unable to complete an income affidavit due to a physical or mental impairment, a family member or guardian may complete the income affidavit on behalf of the participant. If a family member or guardian is not available (i.e. lives out of town) a staff nurse or director may complete the affidavit. Whoever completes the affidavit must provide their contact information as requested in Part 4 of the form. For more information on maintaining income eligibility, please refer to the CACFP Eligibility Guidance Manual for Center-based Programs. The following list of items is required on all income affidavits approved in either the free or reduced categories.

- Part 1: Name and signature for any participants enrolled in center (if income eligible).
- Part 2: Name and case number for all participants enrolled in center (if categorically eligible). The
 case number is applicable if the participant receives Food Stamps, Food Distribution Program on
 Indian Reservations (FDPIR), ALTCS/AHCCCS, or SSI.
- Part 3: Income of all household members (if not categorically eligible).
- Part 4: Contact information, signature and social security number (or the word "none" if no SSN) of person signing the income affidavit. This section should also be dated.

Income affidavits must include the participant letter on the back, be current for the fiscal year, and be signed and approved by the appropriate staff.

Claiming Percentage Rosters

Claiming Percentage Rosters are used to track the number of eligible participants in the free, reduced, and paid categories. These must be tracked on a monthly basis and attendance must be verified for each claim month. Below is a snapshot of a completed claiming roster.

List participants qualifying for _____ meals:

Nan	ne												
Last	First	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
AAA, Jo	ohnny	Χ	Χ	Χ		Χ	Χ	Х	Χ	Х	Χ	Х	X
BBB, D	aisy	Χ	Х				Χ	Х	Х				
CCC, C	helsea	Χ	Х	Χ	Χ	Χ	Χ	Х	Х	Х	Χ	Х	Χ
DDD, M	larc		Х	Χ	Χ	Χ							

Best Practices

Names on sign-in/out sheets, income affidavits and claiming rosters must all match. Records should be kept in alphabetical order and participants listed on claiming rosters should also be listed in alphabetical order.

Income affidavits contain confidential information and therefore should be kept secured, preferably locked up. Access to the affidavits should be restricted to supervisory staff only.

Section 5.3: Title XIX

Title XIX Records (applicable to for-profit centers)

For each month a claim is filed for reimbursement, the center must verify that at least 25% of the total enrolled participants or license capacity, whichever is less, are Title XIX beneficiaries (AHCCS, ALTCS/Medicaid). If the 25% Title XX criteria is not met for any given month, that center cannot file a claim for that month. To be counted as a Title XIX beneficiary, a participant must be claimed for at least one day on the monthly DES assist billing form.

Section 5.4: Meal Counts

The CACFP *requires* that meal counts be taken at point of service. Point of service may be conducted under any of the following guidelines:

- At the very beginning of the meal where participants are seated around the table or as they come through a tray line;
- During meal time where participants are concurrently partaking of the meal;
- Towards the end of the meal before the participant gets up from and leaves the table;
- "Point of Service" must be recorded on the "Point of Service Meal Count Sheet."
 - Must be summarized on the Meal Count Summary.

Point of Service Meal Count Sheet

All Sponsors are required to maintain the point of service meal count sheet. As a reminder, sponsors can claim up to two meals and one snack, one meal and two snacks, or three snacks per participant per day. Below is a snapshot of a completed point of service meal count sheet.

POINT OF SERVICE MEAL COUNT SHEET

Week of_____

- 1. Check off all meals served to a participant (✓)
- 2. A participant may be claimed for a maximum of two meals and one snack *or* two snacks and one meal per day.
- Indicate by use of a colored slash mark specific meals/snacks that will be claimed for reimbursement. (←)

			MON	NDAY	′				•	TUES	SDAY	′				WI	EDNI	ESD/	۱Y	
NAME	BREAKFAST	AM SNACK	LUNCH	PM SNACK	DINNER	NITE SNACK		BREAKFAST	AM SNACK	LUNCH	PM SNACK	DINNER	NITE SNACK	TOATVATOR	DKEANTASI	AM SNACK	LUNCH	PM SNACK	DINNER	NITE SNACK
Johnny, AAA		√	√	√				$\sqrt{}$	√	√	√						√	√	√	
Daisy, BBB			√	√	₹		Ī	$\sqrt{}$		√	√	√		1	\checkmark		√	√	√	
Chelsea, CCC	<mark>√</mark>	√	<mark>→</mark>					√	√	√				-	↓		√	<mark>→</mark>		
Marc, DDD		<mark>→</mark>	 	√					<mark>→</mark>	<mark>→</mark>	 			4	↓	√	√	7	$\sqrt{}$	
TOTALS	1	3	4	3	1			1	3	4	3	1		2	2	1	4	3	2	

Meal Count Summary

Meal count records for each meal served during the month must support each claim for reimbursement. The meal count summary must indicate the daily number of meals served to enrolled participants by type of meal: breakfast, lunch, supper, or snack. Meal counts must be taken at *point of service (i.e. while participants are seated and eating)* and be recorded accurately. Below is a snapshot of a completed Meal Count Summary.

MEAL COUNT SUMMARY

Nο	of Moale	Claimad	for F	Enrolled	Participants
INU.	UI WEAIS	Ciaiiiieu	101 6		railicipalits

Date	Breakfast	A.M. Snack	Lunch	P.M. Snack	At-Risk Snack	Supper	Night Snack
1 st	1	3	4	3		1	
2 nd	1	3	4	3		1	
3 rd	2	1	4	3		2	
Total	4	7	12	9		4	

Edit-Check Meal Counts

Meal Counts should be edit-checked at least monthly. A position should be assigned to conduct Meal Counts and another position should be assigned to edit-check calculated Meal Counts to avoid errors in claims for reimbursement. An "Edit-Checking Policy" should be created that ensures meal counts will be edit-checked prior to claim submissions. The policy should include what position will be responsible for meal counts and how they will be edit-checked to prevent errors.

Computer-Generated Meal Count System

Sponsors who utilize a computer-generated meal count system must obtain prior approval from ADE. Sponsors must complete, and submit to ADE, the "Child and Adult Care Food Program Computer Generated Meal Count Agreement." Documentation of approval must be maintained on file. Sponsors may claim meals using a computer-generated meal count system effective the day approval was obtained from ADE. Meals will be disallowed if prior approval was not obtained or documentation of approval is not available. Daily attendance records alone cannot be used in lieu of a meal count summary or point of service meal count sheet.

Value of Excess Personnel Meals

Although staff or volunteer meals are not reimbursable under the CACFP, those meals consumed must be recorded in the space provided on the Meal Count Summary. If those meals exceed the 1:5 ratio, meaning more than one staff member consumes a meal per five participants, the cost of those meals must be reported on the monthly sponsor claim. A monetary value must be assigned to each meal served above the 1:5 ratio. Sponsors may assign a fair value that represents cost of meal or may use the USDA Reimbursement rate for Free Meals. To determine the ratio divide total number of each meal type served to participants by 5.

Example: Lunch served 1000 participants

 $1000 \div 5 = 200$

You may serve 200 staff meals without reporting a value. If you served 250 staff meals, then you must report the cost of the 50 excess meals.

Section 5.5: Food Service Costs

Costs associated with the CACFP are not reimbursable but are maintained to ensure that sponsors are operating a non-profit food service. Documentation must be available to demonstrate that sponsors are spending more to operate their food service then they are receiving in reimbursement from the Program. Sponsor must also demonstrate that they are spending at least 50% of their reimbursement on food purchases. The following documentation must be maintained to demonstrate a non-profit food service operation:

Non-Profit Food Service

<u>All</u> participating organizations must operate a nonprofit food service principally for the benefit of enrolled participants. Nonprofit food service status is determined by deducting allowable net expenses from the food service revenue. Food service revenue includes:

- Reimbursement from CACFP.
- Income to the Program earned from activities supported by the food service (i.e., Bake Sale event).
- Any other funds used or restricted for use in the nonprofit food service (i.e., Donations, DES funds, Tuition, etc.).
- Funds in the nonprofit food service account are restricted and can be used only for allowable nonprofit food service costs.
- CACFP reimbursement must be spent on CACFP only. Sponsors must be able to demonstrate (paper-trail) that to ADE.

Sponsoring organizations shall also ensure centers under their sponsorship maintain a nonprofit food service. This requirement applies to sponsors of affiliated centers (those centers that are of the same legal entity as the sponsor) and unaffiliated centers (those centers that are not part of the same legal entity as the sponsor).

Food Service Cost Report

The Food Service Cost Report is used to record the amount of money spent on CACFP food and supplies. Food expenses may include food, milk, and other food items used to prepare a creditable meal. Expenses for supplies used in the food service may include paper products such as plates, plastic spoons/forks, and table napkins, cleaning supplies such as dishwashing detergent and bleach to sanitize dishes and kitchen equipment. Copies of supporting documentation, including receipts and invoices, must be maintained on file to support all monthly claims. Below is a snapshot of a completed Food Service Cost Report.

FOOD SERVICE COST REPORT

Itemized Costs	Operational – Direct Meal Service (preparation and service of meals to participants)
Food	Net food used/delivered
Supplies and Equipment	Bleach, paper plates/cups, cooking pans, etc.

Date	Supplier	Total Invoice	Food/ Milk	CACFP Operational Supplies	Non CACFP Supplies	Tax
January 1st	Wal-Mart	\$87.31	\$43.97	\$6.56 (cups)	\$25.86	\$5.93
January 10th	Safeway	\$101.77	\$82.69	\$4.97(dish soap)	\$6.58	\$7.53
_	•	TOTAL	\$ 126.66	\$ 11.53		•

Section 5.6: Facility Costs

Time Distribution Reports

Employee Name:

Sherri Coldwell

Time Distribution Reports document the amount of time spent performing Food Service and Non-Food Service tasks for each day of the month. This information is used to establish the portion of costs that may be claimed as Food Service labor and benefits. Any staff member who performs a CACFP related task must complete the Time Distribution Report to support all salaries and benefits claimed. For information on how to complete, please refer to the instructions on the back of the Time Distribution Report. Below is a snapshot of a completed Time Distribution Report.

TIME DISTRIBUTION REPORT

Director

Position:

	Work	Hours	CACFP Administrative Tasks	Food Service Operational	Totals
				Tasks	
			Α.	В.	C.
Day	Start	End	e.g., Managing, planning,	e.g., meal prep, serving, clean-	Total Hours Worked for
			organizing, training, monitoring	up, supervising, meal counts	the day
1	6:00 am	4:00 pm	4		10
2	6:00 am	4:00 pm	4		10
3	6:00 am	4:00 pm	4		10
4	6:00 am	4:00 pm	2	2	10
5	6:00 am	4:00 pm	4		10
Total A	Administrat	ive Hours W	orked 18 Total Operational Hou	rs Worked 2 Total Monthly	Hours Worked 50
	workdays /	are	tatement: I certify that I am on a fixe _through My work hours le, and all my work hours were spen	s are a.m. to p.m. I did	I not work outside the
l c	ertify that a	II informatio	n is true and correct.		
	OS	herri Poli	dwell		1-31-08
Sic	nature – Er				Date

Month/Year: January 2008

CACFP Monthly Expense Worksheet

The CACFP Monthly Expense Worksheet is used to record labor and facility costs associated with the Program. Labor costs include wages and benefits paid by the sponsor to employees directly involved in the operation and administration of the CACFP. Labor may include time allocated to food preparation and service, food purchasing, cleaning of the food preparation and service areas, supervision of meals, menu planning, or recordkeeping, and other administrative duties. Use the completed time distribution reports as your tool to determine all labor and benefit costs. Below is a snapshot of a completed Monthly Expense Worksheet used to determine labor and benefit costs.

CACFP MONTHLY EXPENSE WORKSHEET

Itemized	Administrative Costs – Overseeing Compliance	Operational Costs – Direct Meal Service
Costs	(planning, organizing and managing CACFP)	(preparation and service of meals to participants)
Salaries	Owner, Director, Monitor	Teachers, Cook
Benefits	Owner, Director, Monitor	Teachers, Cook

ADMINISTRATIVE SALARIES/BENEFITS

LABOR EXPENSES				Bene	fits [†]
Α	В	С	D	E	F
Position, Employee Name	TOTAL ADMINISTRATIVE HOURS PER MONTH (FROM TIME DISTRIBUTION REPORT)*	SALARY PER HOUR	GROSS PAY (B X C)	PERCENT OF TIME SPENT ON CACFP TASKS THIS MONTH B ÷TOTAL MONTHLY HOURS	CACFP PORTION OF BENEFITS TOTAL BENEFITS PAID TO EMPLOYEE
DIRECTOR, Sherri Coldwell	18	\$15.00	\$270.00		
		Total	: \$270.00		

OPERATIONAL SALARIES/BENEFITS

Salaries

Salaries

LABOR EXPENSES				B e	n e f i t s ^T
A	В	С	D	E	F
Position, Employee name	TOTAL OPERATIONAL HOURS PER MONTH (FROM TIME DISTRIBUTION REPORT)*	SALARY PER Hour	GROSS PAY (B X C)	PERCENT OF TIME SPENT ON CACFP TASKS THIS MONTH $TOTAL \\ B \div \frac{\text{Monthly}}{\text{Hours}}$	CACFP PORTION OF BENEFITS TOTAL BENEFITS PAID TO EMPLOYEE
DIRECTOR, Sherri Coldwell	2	\$15.00	\$30.00		
	•	Tota	· \$30.00		•

This institution is an equal opportunity provider.

Benefits

Benefits

Facility expenses are allowable costs specifically related to the CACFP that may include fees for rent/mortgage, contracted services, communications/utilities, and other costs incurred as a result of running the program. No more than 15% of the total costs can come from administrative tasks or costs. The portion of each of these costs must equal the portion of the total facility that is used in the operation of the CACFP. Thus if 25% of the facility is used for the operation of the CACFP, then no more than 25% of the rent, utilities, and maintenance services may be reported on the claim. Copies of all supporting documentation, including bills and invoices, must be kept on file to support facility costs on monthly claims. Below is a snapshot of a completed Monthly Expense Worksheet.

Itemized Costs	Administrative – Overseeing Compliance (planning, organizing and managing CACFP)	Operational – Direct Meal Service (preparation and service of meals to participants)
Rent/Mortgage	Office area	Kitchen, service areas
Contracted Services	Storage facility, computer maintenance	Pest control, refrigerator repair
Communications/ Utilities	Phone, internet	Electricity, water
Other Costs *	Computer, copy machine, administrative supplies (i.e. paper, pens, printer ink, etc)	Stove, refrigerator, grocery shopping

^{*}If you charge for any of these items, you may only charge the CACFP portion of that item (use your approved administrative percentage determined on your Application and Management Plan). You will be required to submit price quotes for large items, such as computers, copy machines, stoves, refrigerator, etc...If you charge gas for grocery shopping, you must keep a mileage log and may only use the current state per diem rate. Go to http://www.gao.state.az.us/travel to determine the current state per diem rate.

Administrative Facility Expenses

Square Footage of CAC	FP Office Space ÷ Total S	Square Footage of Facility = Percent	attributed
200	÷	4800 =	4.2%
(Office Space)	(Entire facility)	(column c)
Α	В	С	D
Service	Billed Amount	Percent Attributed to CACFP	Total (B x C)
Rent or Mortgage	\$4,000.00	0.042 (4.2%)	\$168.00
Contracted Services			
Communications	\$179.61 (Phone/Internet)	0.042 (4.2%)	\$7.54
Other Costs			

Operational Facility Expenses

Square Footage of CACFP Food Service Area ÷ Total Square Footage of Facility = Percent attributed

1000 ÷ 4800 = 21%

(Kitchen, Food storage, eating area) (Entire facility) (column c)

Α	В	C	D
Service	Billed Amount	Percent Attributed to CACFP	Total (B x C)
Rent or Mortgage	\$4,000.00	0.21 (21%)	\$840
Contracted Services			
Utilities	\$258.21 (Electricity)	0.21 (21%)	\$54.22
Other Costs			

Section 5.7: Menus and Food Production Worksheets

Menus

Menus must be maintained for all meals claimed for reimbursement and must indicate all food components that meet the meal pattern requirements. All food menu substitutions must be documented on the menu, and menus are required to be posted in public view (for additional Menu/Food requirements refer to Chapter 7).

Production Worksheets

Production worksheets may be used to ensure that sufficient amounts of food were prepared for the number of participants claimed and staff served. Production worksheets should be completed in advance prior to meal preparation and used as a tool to:

- 1. Plan for the amount of food needed.
- 2. Be used as a food purchase list.
- 3. Record actual amounts of food used.

New sponsors are required to maintain production worksheets for every meal claimed for CACFP reimbursement. When production records are waived by an ADE representative, written documentation identifying the waiver must be permanently maintained on site. After such a determination is made, production records may be maintained on a voluntary basis. If at any time ADE, or a representative thereof, determines that there is not adequate documentation to support fulfillment of the meal pattern requirements, production records will again be required for all meals.

To obtain and print a copy of both the Creditable Foods Guide and the Simplified Buying Guide, go to http://www.ade.az.gov/health-safety/cnp/cacfp/child/Interest.asp.

- The Creditable Foods Guide is designed to provide information on credible and noncredible foods in Childcare Centers/Preschools, Head Start Centers, Outside School Hour Centers, Family Day Care Homes, At-Risk Centers, Emergency Shelters and Adult Day Care Centers.
- The Simplified Buying Guide is designed to assist participants in completing the production worksheets. If you cannot find an item in this guide, you may refer to the USDA Food Buying Guide at http://www.fns.usda.gov/tn/Resources/foodbuyingguide.html.

Steps to complete Production Worksheets (Breakfast):

Step 1: Write date that meals will be served in space provided

Step 2: List number of adults (including staff) who will be eating the meal

Number Planned For:

Adults	Staff	Total
4	8	12

Step 3: Plan menu to meet the meal pattern in spaces provided

Menu: VEGETABLE/ FRUIT Bananas

GRAINS/BREADS Wheaties MILK 1% Milk

Step 4: Calculate the total number of servings

- list total number of people from Step 1 in the "Food Items" column
- multiply by the factor
- write total in "No. of Servings" column

Component Requirements	FOOD ITEMS Age Factor	No. of Servings	
VEGETABLES AND/OR FRUITS	(Total) $12 x 2 = 24$	1⁄4 C.	
	Banana	24	
GRAIN/BREADS	(Total) $12 x 4 = 48$	½ sl.	
	Wheaties	48	
FLUID MILK	(Total) $12 \times 2 = 24$	½ c.	
	1% Milk	24	

Step 5: Use Buying Guide to determine "Market Unit" and "Amount Needed" for the total servings of each food

Component Requirements	FOOD ITEMS Age Factor	No. of Servings	Market Unit	Amount Needed
VEGETABLES AND/OR FRUITS	(Total) $12 \times 2 = 24$	¹⁄4 c.		
	Bananas	24	pound	2.96
GRAIN/BREADS	(Total) $12 \times 4 = 48$	½ sl.		
	Wheaties	48	pound	1.50
FLUID MILK	(Total) $12 x 2 = 24$	½ c.		
	1% Milk	24	gallon	0.76

Step 6: List the "Amount to Purchase" (round up from amount needed)

	FOOD ITEMS Age Factor	No. of Servings	Market Unit	Amount Needed	Amount to Purchase
VEGETABLES AND/OR FRUITS	(Total) $12 x 2 = 24$	¹∕4 c.			
	Bananas	24	pound	2.96	3
GRAIN/BREADS	(Total) <u>12</u> x 4 = <u>48</u>	½ sl.			
	Wheaties	48	pound	1.50	2
FLUID MILK	(Total) $12 x 2 = 24$	¹⁄2 c.			
	1% Milk	24	gallon	0.76	1

Section 5.8: Additional Documentation

Tax-Exempt Status (applicable to non-profit centers)

Non-profit centers must maintain documentation from the IRS of their tax-exempt status or the IRS 501 (c)(3).

License or Approval

Sponsors are required to have a current DHS license or license approval if DHS licensing isn't available.

Centers complying with applicable procedures to renew their DHS licensing, Military Base Certification or Tribal Health Services Certification may participate in the CACFP during the renewal process unless ADE has information which indicates that renewal will be denied.

Centers on Military Bases are eligible for CACFP participation. Centers operated by any branch of the military must submit a "Department of Defense Certificate To Operate License" from their Headquarters in place of the DHS licensing.

Centers on Indian Reservations are eligible for CACFP participation. Centers operating on Tribal Land must submit a "Tribal Environmental Health Service Certification Report" issued by Indian Health Services in place of DHS licensing.

Records To Be Kept On File

The following is a list of recordkeeping items that should be kept on file.

- Copy of all Application (New/Renewal) Materials
- Complete Income Affidavits
- Attendance Records (Claiming Rosters and Sign-in/Sign-out Sheets)
- Food Service Cost Reports (including all supporting documentation such as receipts/invoices)
- CACFP Monthly Expense Worksheet (including all supporting documentation such as bills/invoices)
- Time Distribution Reports
- Meal Count Summaries and Point of Service Meal Count Sheets
- Computer Generated Meal Count Reports (if applicable)
- Policy and Procedures for collection and maintenance of CACFP records
- Policies on addressing block claiming (if applicable)
- Job Descriptions for all employees with detailed CACFP Duties
- Title XIX attendance/billing records (if applicable)
- Administrative Review Procedures
- Procedures for Complaints of Discrimination
- Production Worksheets (as required)
- Menus (including any applicable CN Labels/Product Analysis Data and medical statements)
- Monitoring Records, including 5-day reconciliations (if applicable)
- Training Records (if applicable)
- A copy of the permanent agreement that has been signed by ADE

CACFP Record Keeping Forms are also available on-line at http://www.ade.state.az.us/health-safety/cnp/cacfp/adult/.

Items To Be Posted

The following is a list of items that must be posted:

• "And Justice For All..." poster (must be posted)

Required Written Policies and Procedures

All organizations participating in the CACFP program are required to have a written policy on record maintenance. This policy should address where specific records are kept (i.e. income affidavits are stored in the top drawer of the filing cabinet in the office next to the desk), how long they are kept on site, where archived records are stored, and who has access to all records. All organizations must also have written job descriptions on file that include all CACFP duties or tasks.

Organizations with more than one site participating in the program must have a written policy addressing block claims.

Individual Service Plan of care (ISP)

Sponsors must develop and maintain an ISP for every functionally impaired participant. The plan of care is designed to maintain the participant at his or her current level or restore the participant to a level of self-care. The plan must be in writing and should contain at minimum:

- An assessment of the individual's strengths and needs based on the following:
 - Information obtained from the participant and/or his or her family members
 - A health profile
 - A description of mental and emotional status
 - Level of function in activities of daily living
 - Support services available to the individual
 - Possible need for services from other service providers
 - A current medical examination
- A written plan of service, based on the assessment discussed above which specifies:
 - The goals and objectives of the planned care
 - The activities to achieve the goals and objectives
 - Recommendations for therapy
 - Referrals to and follow-up with other service providers as needed
 - Provisions for periodic review and renewal